This is a sample of the policy document. To determine the precise terms, conditions and exclusions of your cover, please refer to the actual policy and any endorsement issued to you.



ElderShield Plan

The Policyholder named in the Schedule has entered into this contract of insurance ("this Policy") with NTUC Income Insurance Co-operative Limited ("the Company"). This Policy is made up of:

- a) this Policy document;
- b) the Schedule;
- c) the proposal form if applicable; and

d) any endorsements made at the issue of this Policy document or subsequent to the issue of this Policy document.

The Company will pay the benefit stated in the Schedule in exchange for the premium(s) paid by the Policyholder if it is satisfied that the event for which the benefit is payable and the title of the person claiming payment, has been proven. The Company will pay the benefit to the Policyholder.

This Policy is signed on the date of issue.

Andrew Yeo Chief Executive

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DESCRIPTION

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The table of contents, headings and sub-heading in this Policy are inserted merely for convenience of reference and will be ignored in the interpretation of the terms and conditions contained in this Policy.

ElderShield Plan

1. Definition of Severe Disability

Severe Disability shall mean the inability of the Policyholder to perform at least 3 of the following Activities of Daily Living, even with the aid of special equipment, and always to require the physical assistance of another person throughout the entire activity.

A. Washing

The ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash by other means.

B. Dressing

The ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical or medical appliances.

C. Feeding

The ability to feed oneself food after it has been prepared and made available.

D. Toileting

The ability to use the lavatory or manage bowel and bladder function through the use of protective undergarments or surgical appliances if appropriate.

E. Mobility

The ability to move indoors from room to room on level surfaces.

F. Transferring

The ability to move from a bed to an upright chair or wheelchair, and vice versa.

2. Definition of Pre-existing Disability

Pre-existing Disability means suffering from the Severe Disability as defined in paragraph (1) before the Policy Commencement Date, except in the case of a policyholder insured under the Auto-Coverage Arrangement where the Severe Disability caused solely by an accident that occurs during the Offer Period shall not be regarded as a Pre-existing Disability.

3. Definition of Pre-existing Conditions

Pre-existing conditions are defined as conditions for which the Policyholder received medical treatment or was diagnosed in the 12-month period immediately before Policy Commencement Date. For the avoidance of doubt, the following conditions are not pre-existing conditions:

- a. Conditions for which the Policyholder received medical treatment or were diagnosed more than 12 months before the Policy Commencement Date but not during the 12-month period immediately before the Policy Commencement Date; and
- b. Conditions which existed during the 12-month period immediately before the Policy Commencement Date for which the Policyholder did not receive any medical treatment and were not diagnosed during the 12-month period.

4. Definition of Policy Commencement Date

Policy Commencement Date for each Policyholder shall be the date on which the ElderShield coverage commences for that Policyholder.

5. Definition of Government

Government means the Government of the Republic of Singapore and includes any officer authorised by the Government to act on its behalf.

6. Definition of Medisave

Medisave shall have the same meaning as in the Central Provident Fund Act (Cap 36) and any subsidiary legislation enacted thereunder.

7. Definition of Offer Period

Offer Period means the 90-day period prior to the commencement of a policy under the Auto-Coverage Arrangement during which a person may opt-out of the ElderShield Scheme.

8. Definition of Auto-Coverage Arrangement

Auto-Coverage Arrangement means the arrangement under which a person is automatically insured under the ElderShield Scheme on the last day of the calendar month of his 40th birthday unless he opts out of the ElderShield Scheme before the commencement of such auto-coverage or who is uninsurable under the ElderShield Scheme because of a Pre-existing Disability.

9. Definition of Opt-In Arrangement

Opt-In Arrangement refers to the arrangement under which any Singapore Citizen or Permanent Resident aged 40 to 64 (inclusive), who is not eligible to be automatically insured under the Auto-Coverage Arrangement, or who was eligible to be automatically insured under the Auto-Coverage Arrangement but who had opted out of the ElderShield Scheme, may apply to be insured under the ElderShield Scheme.

10. Guaranteed Renewable

The policy is guaranteed to be renewable annually, subject to Clause 17 on Termination.

11. Deferment Period

Deferment Period means the 90-day period from the claim date (inclusive). The first benefit payment shall be payable immediately after the Deferment Period. The claim date shall be deemed to be the date on which the ElderShield Claim Form is certified by an assessor from the panel appointed by the Insurer.

The benefit payments shall cease if the Policyholder ceases to suffer from Severe Disability. If within 180 days from ceasing to suffer from Severe Disability, the Policyholder again suffers from Severe Disability arising from the same cause, the Deferment Period for the new claim shall be waived. If the Policyholder suffers Severe Disability arising from the same cause after the 180-day period or suffers Severe Disability arising from a different cause, the Deferment Period of 90 days shall apply for the new claim.

12. Grace Period

If any premium is not paid on or before its due date, that premium is in default. A grace period of 75 days from the due date of the premium will be granted for the payment of the overdue premium. During the grace period, the policy shall continue in force and shall be valid and effective as though the overdue premium has been paid. If the overdue premium is still not paid at the expiration of the Grace Period, subject to the Clause on the Non-Forfeiture, this policy shall terminate immediately.

13. Reinstatement

If this policy terminates because of non-payment of premiums, the Policyholder may apply for reinstatement of coverage under this policy within 180 days from the expiry of the Grace Period, and reinstatement shall be granted provided the Policyholder, at his own expense, gives evidence of insurability satisfactory to the Insurer and payment of overdue premiums and any interest charged by the Insurer which have accumulated up to the date of reinstatement is made at the time of application for reinstatement. If evidence of insurability is not satisfactory to the Insurer, the Insurer shall have the right not to reinstate this policy and any overdue premiums paid shall be refunded to the Policyholder. Should the Policy be reinstated under this Clause, the effect will be as if the termination never occurred.

14. Lifetime Coverage

Coverage under this Policy is guaranteed for life and the Insurer undertakes not to terminate coverage under this Policy for any reason except as provided in Clause 17 on Termination and Clause 19 on Waiting Period.

15. Incontestability

After one (1) year of continuous coverage from the Policy Commencement Date or the date of reinstatement (whichever is later), the Insurer shall not void this Policy or deny any claim under this Policy for misstatements or failure to disclose on the part of the Policyholder, except on the following grounds:

a. Where a Policyholder is insured under the Auto-Coverage Arrangement, the Policyholder did not disclose his Pre-existing Disability (see Clause 16);

- b. Where a Policyholder had applied to be insured under the Opt-in Arrangement, the Policyholder made a fraudulent misstatement in his application to the Insurer for ElderShield coverage; and
- c. Where the Policy was reinstated, the Policyholder made a fraudulent misstatement in his application for reinstatement.

16. Non-disclosure of Pre-existing Disability

Subject to the Severe Disability caused by Accident, which occurs during the Offer Period as described in Clause 18(b), where a Policyholder is insured under the Auto-Coverage Arrangement, and where Pre-existing Disability is discovered after the Policy Commencement Date, and the Pre-existing Disability was not disclosed prior to the Policy Commencement Date, the Insurer shall refund all premiums paid by or on behalf of the Policyholder and the Policy shall be cancelled.

17. Termination

This Policy will terminate on the earliest of:

- a. Subject to the Clause on Non-Forfeiture, the date of expiration of the Grace Period, if the Policyholder fails to make the required Premium payment prior to the expiration of the Grace Period, unless the Policy is reinstated.
- b. The date of death of the Policyholder;
- c. The date the last benefit payment is received; or
- d. Subject to the Clause on Non-Forfeiture, the date on which written notice of termination is received by the Insurer from the Policyholder. Such termination will only be effective from the next renewal date and there will be no pro-rated refund of premiums.

18. Exclusions

- a. This Policy shall not cover any Severe Disability arising directly or indirectly, wholly or partly from any one of the following occurrences:
 - i. Intentionally self-inflicted injury, or attempted suicide whether the Policyholder is sane or insane;

- ii. War, whether declared or undeclared;
- iii. Alcoholism or drug addiction.
- b. In the case of a person insured under Auto-Coverage Arrangement, no benefit payments shall be made for Pre-Existing Disability (except where the Severe Disability was caused solely by accident(s) which occur during the Offer Period).
- c. In the case of a person insured under Opt-In Arrangement, no benefit payments shall be made for a Disability arising from Pre-Existing Conditions.

19. Waiting Period

No claims, except claims resulting solely from Accident, shall be paid during the first 90 days from the Policy Commencement Date (inclusive). Should the Policyholder become Severely Disabled during the waiting period, other than solely due to accidents, the policy will terminate and the Policyholder will receive a full refund of premiums.

The Waiting Period shall be waived for persons insured under the Auto-Coverage Arrangement.

20. Definition of Accident

For the purposes of this Policy, Accidents shall be defined as unforeseen, violent, external, visible events.

21. Benefits

Upon receipt of an ElderShield Claim Form certified by an assessor from the panel appointed by the Insurer, and subject to the terms and conditions of this Policy, a benefit equal to SGD400 shall be payable to the Policyholder each month, up to a maximum of 72 months per lifetime.

Upon certification of the claim, the first benefit payment shall be payable on the day immediately after the Deferment Period, and thereafter on the same day every month until all benefit payments have been made.

The benefit payment shall cease immediately on the earliest of the following dates:

- a. The date of recovery from Severe Disability;
- b. The date of death of the Policyholder; or
- c. After 72 benefit payments have been made.

22. Right of Recovery

If the Policyholder receives any benefit payment which the Policyholder is not entitled to or ceases to be entitled to, the Policyholder shall repay such benefit payment to the Insurer upon demand.

If the Policyholder fails to make such payment to the Insurer, the Policyholder will fully indemnify the Insurer against any loss, damage, cost and expense whatsoever, including any legal cost on a full indemnity basis, which may be incurred by the Insurer as a result of the Policyholder failing to fully repay the benefit payment or if the Insurer has to enforce its rights to recover the benefit payment.

23. Waiver of Premium

The Insurer will waive the payment of premiums if the Policyholder is Severely Disabled and eligible to receive benefit payments under this Policy on the date when premium is due. The Policyholder is eligible to receive benefit payments under this Policy only after the claim has been approved by the Insurer and the Deferment Period has been met. Premium payment will resume after the Policyholder is no longer disabled and the benefit payments have ceased.

24. Certification by Assessor on Appointed Panel

In order to claim under this Policy, a completed ElderShield Claim Form, including certification by an assessor from the panel appointed by the Insurer, must be submitted to the Insurer. The Policyholder shall be responsible for the cost of the first examination, which shall be reimbursed by the Insurer if the claim is subsequently admitted. The Insurer shall be responsible for the cost of further medical examination or second opinion, if indicated in the ElderShield Claim Form as necessary by the assessor from the appointed panel. The Insurer may also on its own accord require further medical examination and shall bear the cost of such examination.

25. Right of Periodic Examination

While claim payments are being made, the Insurer shall have the right to appoint a doctor to examine the Policyholder periodically, and the Policyholder must afford the Insurer a reasonable opportunity to do so. The cost of this examination and other medical evidence necessary to establish whether the Disability is ongoing, shall be borne by the Insurer.

26. Arbitration

In the event where a claim is denied by the Insurer on the grounds that the Policyholder is not Severely Disabled, and where the Policyholder disputes the Insurer's decision, the Policyholder and the Insurer shall submit their dispute to an Arbitration Panel set up by the Ministry of Health, which may appoint a Geriatrician or other qualified medical practitioner to assess the Policyholder. Costs incurred with this assessment shall be borne by the Insurer if the Arbitration Panel decides that the Policyholder is Severely Disabled, and shall be borne by the Policyholder if the Arbitration Panel decides that the Policyholder is not Severely Disabled. Costs associated with maintaining the Arbitration Panel and conducting arbitration proceedings shall be borne by the Government. The decision of the Arbitration Panel shall be final and binding on both the Insurer and the Policyholder.

27. Maximum Premium Adjustment

Premium adjustments may be made to the Premiums based on an actuarial investigation by an independent party approved by the Government. Any adjustments made will reflect changes in the expected future claims experience and/or changes in the expected investment conditions. Expected future claims experience shall be derived from actual claims experience which shall form part of the actuarial investigation.

Premiums will not be adjusted more than once every 5 years from the preceding adjustment. The maximum premium adjustment allowed for each 5-year period from the start of the scheme shall be 20% of the previous premium charged. Any of this 20% adjustment that has not been used will be carried forward indefinitely and successive unused percentage adjustments will be compounded to calculate the maximum premium increase. Premium adjustments shall not be made if the adjustment is less than 5%.

The increases referred to here are exclusive of any increase due to increases in the level of product benefits.

The premium adjustment shall be subject to the approval of the Government.

28. Geographical Coverage

This Policy shall provide coverage on a 24 hour, worldwide basis.

29. Overseas Residence

Should a Policyholder reside outside of Singapore at the time of claim, the Insurer shall make every reasonable effort to assess the Severe Disability and make claim payments. Under these circumstances, the Insurer shall have the right to commute the benefit payments to a single payment reflecting the present value of future benefit payments. If the Insurer is unable to assess the claim after reasonable attempts have been made, the Insurer has the right to withhold the claim payments until further evidence can be obtained.

30. Non-Forfeiture

After a minimum number of premium payments have been made, this Policy shall not terminate due to non-payment of premiums. Instead, this Policy shall become paid-up with a reduced monthly benefit according to the Table of Paid-Up Values (Refer to Annexes A and B for the minimum number of premium payments to be made and the corresponding paid-up values).

31. Entry Ages

The minimum and maximum entry ages for New Policyholders are 40 years and 64 years respectively.

"New Policyholders" mean ElderShield policyholders who are insured under the ElderShield scheme on or after 30 September 2007.

"Existing Policyholders" mean ElderShield policyholders who were insured under the ElderShield scheme before 30 September 2007.

32. Premium Rebate

A premium rebate may be given to all Policyholders depending on the claims experience of the whole group of ElderShield Policyholders. The premium rebate will be considered once every 5 years.

The premium rebate shall be subject to the approval of the Government.

33. Free Look Privilege

Within 60 days of the Policy Commencement Date, the Policyholder shall be entitled to cancel this Policy and receive a full refund of premiums paid. After 60 days from the Policy Commencement Date, the Policyholder shall be entitled to cancel this Policy. However, no refund of premiums shall be made. Cancellation should be made in writing to the Insurer.

34. Variation of Policy

The terms of this Policy and the coverage under this Policy shall not be varied except upon the direction or approval of the Government. The Government's decision on the terms and coverage of this Policy shall be final and binding on the Insurer and the Policyholder.

35. No Surrender Value

This Policy has no surrender or cash value.

36. Relevant Legislation

This Policy shall be subject to the Central Provident Fund Act (Chapter 36) (including any subsidiary legislation thereunder) and all other relevant legislation on ElderShield, insurance and Medisave.

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Note: The above Paid-Up Policy Values and all subsequent Paid-Up Policy Values Tables are expressed in Singapore dollars.

Annex A

Annex B
Paid-up Policy (PUP) Values – For Existing Policyholders (under the Regular Premium Plan and 10-Year Premium Plan) who join the new ElderShield Scheme (with Benefit of \$400 per month, up to a maximum of 6 years) from 30 September 2007
For Existing policyholders who join the new ElderShield Scheme from 30 September 2007, the PUP value is calculated at follows:
PUP Benefit = <u>Number of Top – Up Premiums Paid</u> *PUP Benefit on \$400/6yr Basis + Total Number of Required Top – Up Premiums
(1 – <u>Number of Top – Up Premiums Paid</u>) *PUP Benefit on \$300/5yr Basis Total Number of Required Top – Up Premiums

For Existing Policyholders under the **Regular Premium Plan** (payable up to age 65), the table shown in Annex A will be for the PUP Benefit for \$400 per month, up to a maximum of 6 years' Basis while Table 1 is the PUP Benefit for \$300 per month, up to a maximum of 5 years' Basis.

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11 100	100	108	109	118	118 120	122	135		139 155	163	173 199	199	219 256 300	256	300									
12 108	108 108	117	118	129	129 132 135	135	149		155 173 184		199	199 228 256 300	256	300										
13 116	117	127		129 140 144 149	144	149	165		173 193	208	228 262		300											
14 125	127	137	140	153	153 158	165	182	193	193 216	235	262 300	300												
15 134	137	148	153	166 173 182	173	182	201	216	216 241	266	300													
16 144	144 148	160	166	160 166 181 190 201	190	201	222		241 269	300													_	
17 155	160	173	181		197 208	222	246	269 300	300															
18 167	173	187	197		214 228	246	271	300																
19 180	180 187	203	214	214 233 250 271	250	271	300																	
20 193	203	219	233		253 274	300																		
21 208	208 219	237	253	276 300	300																			
22 224	224 237	256	276	300																				
23 241	256	277	300																					
24 259	259 277	300																						
25 279	279 300																							
26 300																								

Table 1: PUP Table for Benefit of \$300 per month, up to a maximum of 5 years (Regular Premium Plan)

For Existing Policyholders under the 10-Year Premium Plan, Table 2 will be for the PUP Benefit for \$400 per month, up to a maximum of 6 years' Basis while Table 3 is the PUP Benefit for \$300 per month, up to a maximum of 5 years' Basis.

Policy							Age at inception	ception						
Year	56	57	58	59	60	61	62	63	64	65	66	67	68	69
1														
2														
m														
4	100	100	100	100	100	100	100	100	100	100	100	100	100	100
5	133	133	133	133	133	133	133	133	133	133	133	133	133	133
9	166	166	166	166	166	166	166	166	166	166	166	166	166	166
2	207	207	207	207	207	207	207	207	207	207	207	207	207	207
ø	258	258	258	258	258	258	258	258	258	258	258	258	258	258
6	321	321	321	321	321	321	321	321	321	321	321	321	321	321
10	400	400	400	400	400	400	400	400	400	400	400	400	400	400

Table 2: PUP Table for Benefit of \$400 per month, up to a maximum of 6 years (10-Year Premium Plan)

Table 3: PUP Table for Benefit of \$300 per month, up to a maximum of 5 years (10-Year Premium Plan)

Policy							Age at inception	ception						
Year	56	57	58	59	60	61	62	63	64	65	66	67	68	69
1														
2														
m														
4														
5	100	100	100	100	100	100	100	100	100	100	100	100	100	100
9	125	125	125	125	125	125	125	125	125	125	125	125	125	125
7	155	155	155	155	155	155	155	155	155	155	155	155	155	155
8	193	193	193	193	193	193	193	193	193	193	193	193	193	193
6	241	241	241	241	241	241	241	241	241	241	241	241	241	241
10	300	300	300	300	300	300	300	300	300	300	300	300	300	300

PERSONAL DATA COLLECTION STATEMENT

Income recognises its obligations under the Personal Data Protection Act 2012 (PDPA) which include the collection, use and disclosure of personal data for the purpose for which an individual has given consent to.

The personal data collected by Income includes all personal data provided in this form, or in any document provided, or to be provided to us by you or your insured persons or from other sources, for the purpose of this insurance application or transaction. It includes all personal data for us to evaluate or administer this application or transaction. For example, if you are applying for an insurance policy, in addition to the personal data provided in the application form, the personal data will also include any subsequent information we collect on health or financial situation, or any information that is necessary for us to decide whether to insure and on what terms to insure, such as test results, medical examination results, and health records from medical practitioners or other insurance companies.

You may not alter any of the wording in this 'Personal data collection statement'. Any attempt to do so will be of no effect.

1. Purpose of collection

We may collect and use the personal data to:

- (a) carry out identity checks;
- (b) communicate on purposes relating to an application or policy;
- (c) decide whether to insure or continue to insure you and your insured persons;
- (d) provide financial advice for product recommendation based on your financial needs analysis;
- (e) provide ongoing services and respond to your inquiries or instructions;
- (f) make or obtain payments;
- (g) investigate and settle claims;
- (h) recover any debt owed to us;
- (i) detect and prevent fraud, unlawful or improper activities;
- (j) conduct research and statistical analysis;
- (k) coach employees and monitor for quality assurance;
- (I) reinsure risks and for reinsurance administration; and
- (m) comply with all applicable laws, including reporting to regulatory and industry entities.

2. Disclosure of personal data

We may disclose personal data belonging to you and your insured persons for the purposes set out in Section 1 above to these parties:

- (a) your financial advisers;
- (b) medical professionals and institutions;
- (c) insurers and reinsurers;
- (d) local or overseas service providers to provide us with services such as printing, mail distribution, data storage, data entry, marketing and research, disaster recovery or emergency assistance services;
- (e) debt collection agencies;
- (f) dispute resolution parties;
- (g) parties that assist us to investigate, administer and adjudicate claims;
- (h) financial institutions;
- (i) credit reference agencies;
- (j) industry associations;
- (k) regulators, law enforcement and government agencies; and
- the Government and participating statutory boards and organisations approved by the Government to determine your and your insured person's suitability and eligibility for social and public assistance schemes.

Neither Income nor any of its officers shall be liable for any loss or damage suffered by you or any user as a result of any disclosure of any personal data which you have consented to Income and/or any of its officers disclosing.

3. Consent

By accepting the offer for coverage under ElderShield with Income, you consent to Income:

- (a) collecting, using, disclosing and/or processing the personal data mentioned above for the purposes described above; and
- (b) transferring the personal data mentioned above to Income, its third party service providers, suppliers, agents, reinsurers, fund managers or intermediaries, regardless of whether such third party service providers, suppliers, agents, reinsurers, fund managers or intermediaries are sited in Singapore or outside of Singapore, for the purposes described above.

4. Consequence of withdrawing consent to the collection, use and disclosure of personal data

You may refuse or withdraw your consent for us to collect, use or disclose your personal data and your insured persons' personal data by giving us reasonable notice so long as there are no legal or contractual restrictions preventing you from doing so. For example, you may withdraw your consent for your personal data to be used for marketing purposes. This withdrawal will not affect our ability to provide you with the products and services that you asked for or have with us.

But if you withdraw your consent for us to use your personal data for your insurance matters (matters relating to the servicing and administration of your insurance policy) this will affect our ability to provide you with the products and services that you asked for or have with us, including preventing us from keeping your insurance cover in force or properly assessing and processing your claim. Withdrawing such consent may result in the termination of all your policies with us. This may be disadvantageous to you, as you may lose valuable benefits from the policy and/or it may not be possible for you to obtain a similar level of protection on the same terms in the future.

5. Access and correction rights

You can request access to any personal data of yours that we have, and request to know how it has been used and disclosed for the last 1 year to the extent allowed by law. You also have the right to request correction of your personal data.

You may make your request to withdraw your consent, access or correct your personal data by writing to:

The Data Protection Officer Income Centre 75 Bras Basah Road Singapore 189557

Alternatively, you can email to:

DPO@income.com.sg